### INFORMATION FOR LICENSING STUDY

Complete and Mail to: Alabama Department of Human Resources

Office of Resource Management

Gordon Persons Building

50 Ripley Street

Montgomery, Alabama 36130

Type Faci	lity:	☐ Child	Care Institution	☐ Child-	Placing Agency	☐ Group Home	
Facility Na	ame:						
Address:		No.	and Street	City	County		
Telephone Number:		er:	During Office Hours		After Hours for Emergencies		
Applicant	Name:				son or Corporation		
Name and	d Title of	Person wi	th Responsibility	and Authority to	o Work with Departm	nent Representative	
Address:							
Telephon	e Numb	er:	During Offic	e Hours	After Hours f	or Emergencies	
A. FL			E <b>FACILITY</b> In served				
2.	Capac	ity of the F	acility				
3.	Ages	of children					
4.	Geogr	aphic area	served				
5.	5. Attach a description of the focus and function of the facility, if this is an initial						

application or if amended since last application process.

6. Attach any publication giving information in addition to the above.

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#### **B. ADMISSION AND DISCHARGE**

Attach copies of admission and discharge policies and practices, if this is an initial application or if amended since last application process.

#### C. BOARD

1.	If there is a board, describe how members are appointed.					
2.	How often does the board meet?					
3.	Dates of regular meetings					

4. Attach a list of the names and addresses of all members of the Board; indicate when the term of each expires; specify the Chairman and committee members of each committee of the Board.

#### D. ORGANIZATION

- 1. If incorporated, attach copy of incorporation papers, if this is an initial application or if amended since last application process.
- 2. Attach copy of by-laws and constitution, if this is an initial application or it amended since last application process.

#### E. FINANCIAL INFORMATION

- 1. Attach copy of projected or current budget.
- 2. Attach copy of most current audit, if applicable.
- 3. Attach policies regarding charges and services, if this is an initial application or if amended since last application process.

#### F. PERSONNEL

- 1. Attach copy of personnel policies, including job description and qualifications, if this is an initial application or if amended since last application process.
- 2. List staff members and give requested information. (Attach additional sheets as necessary to indicate duties assigned other than indicated by the title of the position.

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Name	Position	Age	Education (No. of Years)				# Years Experience	# Hrs of
			High School	Under- graduate	Graduate	Degrees	Experience in Field of Child Care	Work Per Wk

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#### II. SOCIAL SERVICE

Attach a detailed and specific description of the provision for social services, if applicable. (If social service is provided through another source, attach a copy of the written agreement or contract along with the above.)

#### **III. PLANT** (Not applicable for Child-Placing Agencies)

- A. Attach a certificate of approval based on an inspection by the fire department, made within the last three months.
- B. Attach a certificate of approval based on an inspection by the health department, made within the last three months.
- C. Attach a statement showing compliance with all local zoning laws, where applicable.

I / We certify that the information given on this form is true and correct to the best of my / our knowledge. I / We understand that any misrepresentation of information may be grounds for denial of the application.

Signaturo:

	Signature.		
		(Face at the co	
		(Executive)	
	Signature:		
		(Board Chairman)	
Date:			